Fill	in this information to identify yo	our case:			
	otor 1 Harriet E Salle				
0.0	First Name	Middle Name	Last Name		
	otor 2 use if, filing) First Name	Middle Name	Last Name		
Uni	ted States Bankruptcy Court for th	e: EASTERN DISTRICT O	F VIRGINIA		
Cas	se number 20-33649				
	own)			☐ Chec	ck if this is an
				amei	nded filing
	ficial Form 106Sum				
			d Certain Statistical Information are filing together, both are equally responsible for		12/15
	original forms, you must fill ou		e information on this form. If you are filing amend the box at the top of this page.		ules after you file
					of what you own
1.	Schedule A/B: Property (Officia 1a. Copy line 55, Total real estat	al Form 106A/B) e, from Schedule A/B		\$	789,800.00
	1b. Copy line 62, Total personal	property, from Schedule A/B		\$	12,950.00
	1c. Copy line 63, Total of all prop	perty on Schedule A/B		\$	802,750.00
Par	t 2: Summarize Your Liabilitie	es			
				Your	liabilities
					nt you owe
2.	Schedule D: Creditors Who Have 2a. Copy the total you listed in C		(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	916,000.00
3.	Schedule E/F: Creditors Who Ha 3a. Copy the total claims from P	ave Unsecured Claims (Officia Part 1 (priority unsecured claim	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from P	art 2 (nonpriority unsecured c	aims) from line 6j of Schedule E/F	\$	69,218.59
			Your total liabilities	\$	985,218.59
Par	t 3: Summarize Your Income	and Evnences			
		•			
4.	Schedule I: Your Income (Official Copy your combined monthly income)	,	1	\$	11,219.00
5.	Schedule J: Your Expenses (Offi Copy your monthly expenses fro			\$	7,729.49
Par	4: Answer These Questions	for Administrative and Stati	stical Records		
6.	Are you filing for bankruptcy u No. You have nothing to rep	•	neck this box and submit this form to the court with yo	ur other so	chedules.
	■ Yes				
7.	What kind of debt do you have	?			
	Your debts are primarily of household purpose." 11 U.S	consumer debts. Consumer of S.C. § 101(8). Fill out lines 8-9	debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	a persona	I, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____11,219.00

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this infor	mation to identify you	ur case and th	ic filing	N:				
_			ıs ıllılı	J ·				
Debtor 1	Harriet E Salley First Name	Middle	Name	Last Name				
Debtor 2								
Spouse, if filing)	First Name	Middle	Name	Last Name				
Jnited States Ba	ankruptcy Court for the	: EASTERN I	DISTRI	CT OF VIRGINIA				
Case number	20-33649							Check if this is ar amended filing
n each category, shink it fits best. Enformation. If mounswer every que	Be as complete and accure space is needed, attaction. Each Residence, Buildi	ribe items. List a urate as possible ch a separate sh ing, Land, or Oth	e. If two leet to the	only once. If an asset fits in more than on- married people are filing together, both are his form. On the top of any additional pages Estate You Own or Have an Interest In lence, building, land, or similar property?	equally respond	onsible for su	the ca	g correct
Yes. Where	is the property?		What	: is the property? Check all that apply				
	ford Lane			Single-family home	Do not dod	ict cocured cla	ime or	exemptions. Put
Street address	if available, or other descripti	on		Duplex or multi-unit building Condominium or cooperative	the amount	of any secured	d claim	is on Schedule D: Fured by Property.
Richmon	d VA 2	3235-0000 ZIP Code		Manufactured or mobile home Land	Current val			rent value of the ion you own?
City	State	ZIP Code		Investment property Timeshare Other	Describe the	ne nature of you		vnership interest by the entireties, or
			Who	has an interest in the property? Check one Debtor 1 only	Fee simp	e), if known. Die		
Richmon	d City			Debtor 2 only				
County						if this is com	munit	y property
					(tructions)		
				r information you wish to add about this ite erty identification number:	m, such as lo	cal		
			Tax	assessed at \$200,000. Recent ap	praisal can	ne in at \$28	8,00	0.

Del	otor 1	Harriet E	Salley				Case num	ber (if known)	20-3	3649
	If you	ı own or ha	ave more	than one, list h	nere:					
1.2				·	What	is the property? Check all that apply				
		Topping L ddress, if availab		ecription		Single-family home				ims or exemptions. Put
	Officera	uuress, ii avallab	ne, or other des	scription		Duplex or multi-unit building				d claims on Schedule D: ns Secured by Property.
						Condominium or cooperative				
						Manufactured or mobile home	Cur	rent value of t	ho	Current value of the
	Glen	Allen	VA	23060-0000		Land		ire property?	iie	portion you own?
	City		State	ZIP Code		Investment property		\$501,800	.00	\$501,800.00
										our ownership interest
					Who	Other has an interest in the property? Check		ch as fee simp e estate), if kn		ancy by the entireties, or
					•	Debtor 1 only	COLIC	e simple		
	Henri	ico				•				
	County							Chask if this		it.,
						At least one of the debtors and another	er 🗆	(see instructions		munity property
						r information you wish to add about t	his item, suc	h as local		
					prop	erty identification number:				
2.						your entries from Part 1, includin				\$789,800.00
	pages	you nave at	tached for	Part 1. Write tha	t numbe	r here		=>		
Par	t 2: Des	scribe Your V	ohiolos							
ı aı	. Z. Des	SCIIDE TOUT V	enicies							
						ny vehicles, whether they are reg			any ve	hicles you own that
SOIII	eone es	se unves. II y	you lease a	venicie, also repo	on it on a	Schedule G: Executory Contracts ar	па опехріге	u Leases.		
3. C	Cars, va	ns, trucks, t	ractors, sp	oort utility vehicle	es, moto	orcycles				
	No									
] Yes									
_	1 162									
4 V	Vatorora	aft aircraft	motor hom	nes ATVs and of	har racr	eational vehicles, other vehicles,	and acces	eorios		
				•		ng vessels, snowmobiles, motorcyc	•			
	•									
	No									
L	l Yes									
5	Add the	dollar value	e of the po	rtion vou own fo	r all of v	our entries from Part 2, including	g any entrie	es for		
						here				\$0.00
				Household Items		(4) (1) 1 1 1				
ро	you ow	n or have a	ny legal or	equitable interes	st in any	of the following items?				Current value of the ortion you own?
									Ċ	Oo not deduct secured
6. F	louseho	old goods a	nd furnishi	inas					C	laims or exemptions.
	Example			rniture, linens, chi	na, kitch	enware				
_	□No									
ı	Yes.	Describe								
			cofo	armohair ont	ortainm	ant center mise tables and le	amne			
						ent center, misc tables and la china hutch, 4 beds, 4 dresse		n		
			table	& 4 chairs, mi	icrowav	ve, dishwasher, refrigerator, s				
			wasl	her & dryer, kit	chenwa	are			-	\$7,000.00

Debtor	1 Harriet E Sa	Iley Case number (if known)	20-33649
7. Elect Exar	mples: Televisions a	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music c I phones, cameras, media players, games	collections; electronic devices
□ N	0		
■ Ye	es. Describe		
		2 TVs (inoperable), cell phone	\$200.00
	other collect	I figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin ons, memorabilia, collectibles	, or baseball card collections;
□ Ye	es. Describe		
	musical instr	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
_	es. Describe		
□ N	amples: Pistols, rifle	s, shotguns, ammunition, and related equipment	
_ ''	es. Describe		
		22 caliber handgun	\$200.00
□ N		othes, furs, leather coats, designer wear, shoes, accessories	¢500.00
		womens clothing	\$500.00
□ N	amples: Everyday je	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
Exa ■ No	n-farm animals namples: Dogs, cats, o es. Describe	birds, horses	
■ N	•	d household items you did not already list, including any health aids you did not list	
	•		
		of all of your entries from Part 3, including any entries for pages you have attached number here	\$12,900.00
Part 4:	Describe Your Finar	icial Assets	
Do you	own or have any	egal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.

Debtor 1	Harriet E Salley			Case number (if	known) 20-336 4	49
□ No	mples: Money you have in		me, in a safe deposit box, and on h	and when you file yo	ur petition	
– re	5			Cash		\$50.00
			ounts; certificates of deposit; shares with the same institution, list each.	in credit unions, brol	kerage houses, an	nd other similar
□ No	es		Institution name:			
- 16			Village Bank checking a	ccount ending in	1	
	17.1	1. Checking	3659			Unknown
<i>Exa</i> ■ No	•		okerage firms, money market accour	nts		
	t venture	d interests in incorpo	orated and unincorporated busine	esses, including an	interest in an LL	C, partnership, and
■ Ye	es. Give specific information	on about themlame of entity:		% of ownership) :	
		larriet Salley Auto on the debt than assetting the debt than assetting the debt than assetting the debt are debt.	Group, LLC - business has ets.	51%	_ %	\$0.00
Neg	notiable instruments include n-negotiable instruments ar	e personal checks, cas	tiable and non-negotiable instrun hiers' checks, promissory notes, an nsfer to someone by signing or deliv	d money orders.		
☐ Ye	s. Give specific informatio	n about them ssuer name:				
	•		03(b), thrift savings accounts, or oth	ner pension or profit-	sharing plans	
_	s. List each account separ	rately. e of account:	Institution name:			
You	mples: Agreements with la	sits you have made so	that you may continue service or us public utilities (electric, gas, water),		companies, or oth	ers
	9S		Institution name or individual	:		
23. Ann ı ■ No		riodic payment of mone	ey to you, either for life or for a numb	per of years)		
		ame and description.				
	S.C. §§ 530(b)(1), 529A(b		ualified ABLE program, or under a	a qualified state tui	tion program.	
_		n name and description	n. Separately file the records of any	interests.11 U.S.C. §	521(c):	
25. Trus	•	terests in property (o	ther than anything listed in line 1), and rights or pow	ers exercisable f	or your benefit

 $\hfill \square$ Yes. Give specific information about them...

Debto	r 1 Harriet E Salley		Case number (if known)	20-33649
_E:	ntents, copyrights, trademarks, t examples: Internet domain names,			
■ I	No Yes. Give specific information abo	out them		
	, , ,	_	ion holdings, liquor licenses, professional license	es
-	Yes. Give specific information abo	out them		
Mone	y or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
= 1				
П,	Yes. Give specific information abo	out them, including whether you a	Iready filed the returns and the tax years	
	·	imony, spousal support, child su	oport, maintenance, divorce settlement, property	settlement
□ `	Yes. Give specific information			
<i>E</i> :	benefits; unpaid loans ye		enefits, sick pay, vacation pay, workers' comper	nsation, Social Security
■ ı	No Yes. Give specific information			
_E:		nsurance; health savings accoun	t (HSA); credit, homeowner's, or renter's insurar	nce
	No Yes. Name the insurance compan	y of each policy and list its value		
	•	any name:	Beneficiary:	Surrender or refund value:
lf sc □ l	omeone has died.		died insurance policy, or are currently entitled to rece	eive property because
		recently learned that his children, not his current remains in the home and when she dies. Not clear	hway in Feb 2019 and debtor only home in Alabama passed to his wife. Father's incapacitated wife his 7 children will sell the property if he had a will or not. AL intestacy and 50% to decedants children by	
		another spouse.	,	Unknown
	xamples: Accidents, employment		suit or made a demand for payment hts to sue	
	Yes. Describe each claim			
		Clearwater Pools - dama cost \$25,000 or so to rep	ge done to pool water input and will air	Unknown

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

Debto	or 1	Harriet E Salley			Case number (if known)	20-33649	
	Yes.	Describe each claim					
35. A r	ny fin	ancial assets you did not all	ready list				
	-	·	•				
	Yes.	Give specific information					
			All items inherited that VA law up to the \$5,000		f heirlooms under		Unknown
			Any insurance proceed Ann. § 38.2-3122	s that fit the defini	tion in Va. Code		Unknown
			entries from Part 4, includin				\$50.00
Part 5:	Des	scribe Any Business-Related Pro	operty You Own or Have an Inter	est In. List any real esta	ate in Part 1.		
37 Do	VOLLO	wn or have any legal or equitab	le interest in any business-relate	nd nronerty?			
	-	to Part 6.	no interest in any buomoco rolate	a proporty .			
_		o to line 38.					
ш,	es. G	o to line so.					
Part 6:		scribe Any Farm- and Commerci ou own or have an interest in farm	al Fishing-Related Property You land, list it in Part 1.	Own or Have an Interes	st In.		
	_		·				
_		· -	quitable interest in any farm-	or commercial fishin	g-related property?		
	No.	Go to Part 7.					
	Yes.	Go to line 47.					
Part 7:		Describe All Property You Ow	n or Have an Interest in That Yoເ	Did Not List Above			
rait /	•	Describe All Froperty Tod Ow	ii oi mave an interest in mat Tot	Did Not List Above			
			kind you did not already list?	?			
<i>E</i>	•	les: Season tickets, country cl	lub membersnip				
		Give specific information					
_							
54. /	Add tl	he dollar value of all of your	entries from Part 7. Write the	at number here			\$0.00
Part 8:	:	List the Totals of Each Part of t	his Form				
55. F	Part 1	· Total real estate line 2				¢	789,800.00
		: Total vehicles, line 5		\$0.00		Ψ	709,000.00
		: Total personal and househ	nold items. line 15	\$12,900.00			
		: Total financial assets, line		\$50.00			
		: Total business-related pro		\$0.00			
		: Total farm- and fishing-rela		\$0.00			
		: Total other property not lis	• • •	\$0.00			
		personal property. Add lines		\$12,950.00	Copy personal property to	otal	\$12,950.00
63 1	Total :	of all property on Schedule	A/B Add line 55 + line 62			¢on	2 750 00

rmation to identify your	case:		
Harriet E Salley			
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
ankruptcy Court for the:	EASTERN DISTRICT O	PF VIRGINIA	
20-33649			
20 000 10			☐ Check if this is an amended filing
	First Name	First Name Middle Name First Name Middle Name ankruptcy Court for the: EASTERN DISTRICT C	Harriet E Salley First Name Middle Name Last Name First Name Middle Name Last Name ankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property \	You Claim a	s Exempt
---------	--------------	------------	-------------	----------

1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.						
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)						
	☐ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)								
2.	For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption					
	, , , , , , , , , , , , , , , , , , , ,	Copy the value from Schedule A/B	Che	eck only one box for each exemption.						
	6647 Wexford Lane Richmond, VA 23235 Richmond City County	\$288,000.00		\$1.00	Va. Code Ann. § 34-4 Real or Personal Property					
	Tax assessed at \$200,000. Recent appraisal came in at \$288,000. Line from <i>Schedule A/B</i> : 1.1			100% of fair market value, up to any applicable statutory limit	reisonal Property					
	4932 Topping Lane Glen Allen, VA 23060 Henrico County	\$501,800.00		\$1.00	Va. Code Ann. § 34-4 Principal Residence					
	Line from Schedule A/B: 1.2			100% of fair market value, up to any applicable statutory limit	Residence					
	sofa, armchair, entertainment center, misc tables and lamps, dining table	\$7,000.00		\$5,000.00	Va. Code Ann. § 34-26(4a)					
	and 6 chairs, china hutch, 4 beds, 4 dressers, kitchen table & 4 chairs, microwave, dishwasher, refrigerator, stove, washer & dryer, kitchenware Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit						
	sofa, armchair, entertainment center, misc tables and lamps, dining table	\$7,000.00		\$2,000.00	Va. Code Ann. § 34-4 Real or					
	and 6 chairs, china hutch, 4 beds, 4 dressers, kitchen table & 4 chairs, microwave, dishwasher, refrigerator, stove, washer & dryer, kitchenware			100% of fair market value, up to any applicable statutory limit	Personal Property					

Line from Schedule A/B: 6.1

epto	Pri Harriet E Salley			Case number (if known)	20-33649
	Brief description of the property and line on Schedule A/B that lists this property	portion you own		ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	22 caliber handgun ine from <i>Schedule A/B</i> : 10.1	\$200.00		\$200.00	Va. Code Ann. § 34-26(4b)
-	and total conceder 702. Tell			100% of fair market value, up to any applicable statutory limit	
	womens clothing ine from Schedule A/B: 11.1	\$500.00		\$500.00	Va. Code Ann. § 34-26(4)
_	Life Hotti Schedule A/D. 1111			100% of fair market value, up to any applicable statutory limit	
	misc jewelry Line from Schedule A/B: 12.1	\$5,000.00		\$2,999.00	Va. Code Ann. § 34-4 Real or Personal Property
LII	ane nom <i>Schedule Alb.</i> 12.1			100% of fair market value, up to any applicable statutory limit	reisonari Toperty
_	All items inherited that fit the definition of heirlooms under VA law	Unknown			Va. Code Ann. § 34-26(2)
ι	up to the \$5,000 maximum Line from Schedule A/B: 35.1			100% of fair market value, up to any applicable statutory limit	
	Any insurance proceeds that fit the definition in Va. Code Ann. §	Unknown			Va. Code Ann. § 38.2-3122
3	38.2-3122 Line from <i>Schedule A/B</i> : 35.2			100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption Subject to adjustment on 4/01/22 and every			led on or after the date of adjustmer	nt.)
ì	■ No	,		,	•
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

	ation to identify you	r case:			
Debtor 1	Harriet E Salley			_	
	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name		-	
		EASTERN PISTRICT OF WROLING			
United States Ban	kruptcy Court for the:	EASTERN DISTRICT OF VIRGINIA		-	
	0-33649				
(if known)				_	if this is an
				amend	led filing
Official Form	106D				
		Who Have Claims Secured	hy Proport	M	12/15
<u>Scriedule i</u>	D. Creditors	Wild have claims secured	by Propert	<u>y</u>	12/13
		f two married people are filing together, both are equut, number the entries, and attach it to this form. Or			
, ,	nave claims secured by	your property?			
	_	is form to the court with your other schedules. Yo	ou have nothing else t	o report on this form.	
_	all of the information b	•	ou have hourning olde t	io roport orrano romi.	
		Delow.			
Part 1: List All			Column A	Column B	Column C
		nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
		al order according to the creditor's name.	Do not deduct the	that supports this	portion
2.1 Fay Servic	ina I Ic	Describe the property that secures the claim:	value of collateral. \$600,000.00	claim \$501,800.00	If any \$98,200.00
Creditor's Name	<u>g =</u>	4932 Topping Lane Glen Allen, VA 23060 Henrico County POC 4			
	ruptcy Dept	As of the date you file, the claim is: Check all that			
Po Box 809		apply. ☐ Contingent			
Chicago, II					
Chicago, II		_			
	City, State & Zip Code	Unliquidated			
Number, Street, 0	City, State & Zip Code	_			
Number, Street, 0	City, State & Zip Code	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.	ured		
Number, Street, (Who owes the deb	City, State & Zip Code	☐ Unliquidated ☐ Disputed	ured		
Number, Street, of the debt of	City, State & Zip Code ot? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ■ An agreement you made (such as mortgage or sec	ured		
Number, Street, of Number, Stree	City, State & Zip Code ot? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or sec car loan)	ured		
Number, Street, of Who owes the debter 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debter 1 and Debter 1 only	city, State & Zip Code ot? Check one. otor 2 only e debtors and another im relates to a	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or sec car loan) ☐ Statutory lien (such as tax lien, mechanic's lien)	ured		
Number, Street, 0 Who owes the deb Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the Check if this cla	city, State & Zip Code ot? Check one. otor 2 only e debtors and another im relates to a	 ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or sec car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit 	ured		

1339

Last 4 digits of account number

Date debt was incurred Active 05/19

Debtor 1 Harriet E Salley	Case number (if known) 20-33649								
First Name Mid	ddle Name Last Name								
2.2 Fay Servicing Llc	Describe the property that secures the claim:	\$146,000.00	\$288,000.00	\$0.00					
Creditor's Name Attn: Bankruptcy Dept	6647 Wexford LAne Richmond, VA 23235 Richmond City County POC 8 Tax assessed at \$200,000. Recent appraisal came in at \$288,000.								
Po Box 809441	As of the date you file, the claim is: Check all that	t							
Chicago, IL 60680	apply. ☐ Contingent								
Number, Street, City, State & Zip Code	<u> </u>								
Who owes the debt? Check one.	Nature of lien. Check all that apply.								
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or car loan)	r secured							
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	n)							
☐ At least one of the debtors and anot	her U Judgment lien from a lawsuit								
☐ Check if this claim relates to a community debt	Other (including a right to offset)								
Opened 05/04 La Date debt was incurred Active 05	400	24							
2.3 W. Harold Talley	Describe the property that secures the claim:	\$170,000.00	\$288,000.00	\$28,000.00					
Creditor's Name	6647 Wexford Lane Richmond, VA 23235 Richmond City County Tax assessed at \$200,000. Recent appraisal came in at \$288,000.								
4905 Radford Ave Suite 200 Richmond, VA 23230	As of the date you file, the claim is: Check all that apply.	_ t							
Number, Street, City, State & Zip Code		Contingent							
Number, Street, City, State & Zip Code	☐ Disputed	Unliquidated							
Who owes the debt? Check one.	Nature of lien. Check all that apply.								
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or car loan)	r secured							
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	n)							
At least one of the debtors and anot	her								
☐ Check if this claim relates to a community debt	Other (including a right to offset)								
Date debt was incurred	Last 4 digits of account number								
·	in Column A on this page. Write that number here: add the dollar value totals from all pages.	\$916,000							
Write that number here:		\$916,000	J.00						
Part 2: List Others to Be Notifie	ed for a Debt That You Already Listed								
trying to collect from you for a debt y	s to be notified about your bankruptcy for a debt that you owe to someone else, list the creditor in Part 1, are that you listed in Part 1, list the additional creditors nit this page.	nd then list the collection ag	ency here. Similarly, if y	ou have more					
Name, Number, Street, City, Sta	te & Zip Code On	which line in Part 1 did you en	ter the creditor? 2.1						
BWW Law Group 8100 Three Chopt Rd, S Henrico, VA 23229	ite 240 Las	st 4 digits of account number							

Deb	tor 1 Harriet E Salle	еу		Case number (if known)	20-33649
	First Name	Middle Name	Last Name		
	Name, Number, Street, BWW Law Group 8100 Three Chop Henrico, VA 2322	t Rd, Ste 240		On which line in Part 1 did you ent	er the creditor? 2.2

Fill ir	this info	ormation to identify your	case:					
Debto	or 1	Harriet E Salley						
Dobte	J1 1	First Name	Middle Na	ame Last	Name			
Debto								
(Spous	e if, filing)	First Name	Middle Na	ame Last	Name			
Unite	d States I	Bankruptcy Court for the:	EASTERN [DISTRICT OF VIRGINIA				
Case	number	20-33649						
(if knov		20 00040		_				Check if this is an
							а	mended filing
Sch	edule	rm 106E/F E/F: Creditors W				art 2 for creditors with NONP	RIORITY clai	12/15
Sched Sched eft. At name a	ule G: Exe ule D: Cre tach the C and case r	ecutory Contracts and Unexp ditors Who Have Claims Sec continuation Page to this pag number (if known).	oired Leases (Of ured by Proper ge. If you have r	fficial Form 106G). Do not i ty. If more space is needed no information to report in	include a d, copy t	ontracts on Schedule A/B: Pr any creditors with partially se he Part you need, fill it out, no lo not file that Part. On the to	cured claims umber the en	that are listed in tries in the boxes on the
Part '		All of Your PRIORITY Un						
_	_	ditors have priority unsecure	d claims agains	st you?				
_	No. Go to	o Part 2.						
	Yes.							
Part 2	2 List	: All of Your NONPRIORIT	V Unsacurad	Claims				
		ditors have nonpriority unsec						
_	_		_					
L	■ No. You	have nothing to report in this p	art. Submit this t	form to the court with your ot	her sche	dules.		
	Yes.							
ur th	nsecured c	claim, list the creditor separately	y for each claim.	For each claim listed, identif	fy what ty	holds each claim. If a creditor pe of claim it is. Do not list claim three nonpriority unsecured cla	ms already inc	cluded in Part 1. If more
	art Z.							Total claim
4.1	Amex	•		Last 4 digits of account no	umber	3973		\$701.83
		ority Creditor's Name						—
		espondence/Bankrupto	y			Opened 01/19 Last A	ctive	
		ox 981540 so, TX 79998		When was the debt incurr	ed?	9/11/19		-
		r Street City State Zip Code		As of the date you file, the	e claim i	s: Check all that apply		
		curred the debt? Check one.		• ,		,		
	■ Deb	otor 1 only		☐ Contingent				
	☐ Deb	otor 2 only		☐ Unliquidated				
	_	otor 1 and Debtor 2 only		☐ Disputed				
	_	east one of the debtors and an	other	Type of NONPRIORITY un	secured	claim:		
		eck if this claim is for a com		☐ Student loans				
	debt		•		of a sepa	ration agreement or divorce tha	t you did not	
		claim subject to offset?		report as priority claims				
	■ No			·		g plans, and other similar debts		
	☐ Yes	;		■ Other, Specify Credi	it Card			

Harriet E Salley		Case number (if known) 20	0-33649
Amex/Bankruptcy	Last 4 digits of account number	9152	\$1,225.00
Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 12/18 Last Ac 9/18/19	tive
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that	you did not
s the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin	= :	
Yes	Other. Specify Credit Card	<u> </u>	
Clearwater Pool Service	Last 4 digits of account number		\$2,000.00
Nonpriority Creditor's Name 570 E. Hundred Road Chester, VA 23836	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that	you did not
■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
⊒ Yes	Other. Specify consumer		
Comenity Bank/Wayfair	Last 4 digits of account number	2525	\$3,841.62
Nonpriority Creditor's Name			
Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 11/18 Last Ac 09/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that	you did not
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Charge Ac	1 000 01 00	

Debto	Pr 1 Harriet E Salley		Case number (if known)	20-33649					
4.5	Credit Union Of Rich Nonpriority Creditor's Name	Last 4 digits of account number	0001	_	\$18,067.55				
	Po Box 26024 Richmond, VA 23261	When was the debt incurred?	Opened 12/24/18 8/08/19	Last Active					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim							
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	Unliquidated							
	☐ Debtor 1 and Debtor 2 only	Disputed	d alaim.						
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecure Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	aration agreement or divord	e that you did not					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar	debts					
	Yes	Other. Specify Unsecured							
4.6	Macys (p) Nonpriority Creditor's Name	Last 4 digits of account number	9152	_	\$998.68				
	RE: Bankruptcy P O Box 9001094 Louisville, KY 40290-1094	When was the debt incurred?							
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	Disputed	d alatas						
	At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	a ciaim:						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims							
	■ No	Debts to pension or profit-sharing	ng plans, and other similar	debts					
	□ Yes	Other. Specify Credit card							
4.7	Navy Federal Credit Union	Last 4 digits of account number	7262	_	\$35,208.91				
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119	When was the debt incurred?	Opened 08/18 Las 8/31/19	st Active					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply						
	Who incurred the debt? Check one.	_							
	Debtor 1 only	Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaimi						
	At least one of the debtors and another	Student loans	u Gidiili.						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorc	e that you did not					
	No	<u>_</u>	□ Debts to pension or profit-sharing plans, and other similar debts						
	☐ Yes	■ Other Specify Unsecured							

USAA Federal Savings Bank	Last 4 digits of account number	1900	\$7,175.0
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 06/18 Last Active	
10750 Mcdermott Freeway San Antonio, TX 78288	When was the debt incurred?	09/19	
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	I	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
T. (.)	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	01	On the other co	01	Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 69,218.59
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 69,218.59

Fill in this infor	mation to identify your	case:		
Debtor 1	Harriet E Salley			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT C	PF VIRGINIA	
Case number	20-33649			
(if known)				Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Extra Space 9001 Old Staples Mill Rd Henrico, VA 23228 month to month storage unit rental

Fill in this i	nformation to identify your	case:			
Debtor 1	Harriet E Salley				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name		
United State	s Bankruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA		
Case number	er 20-33649				
(if known)					☐ Check if this is an amended filing
Official	Form 106H				
Schedu	ıle H: Your Cod	ebtors			12/15
people are f ill it out, and your name a		ally responsible for suppl boxes on the left. Attach . Answer every question.	lying correct information the Additional Page to t	n. If more space is need this page. On the top of	as possible. If two married led, copy the Additional Page, any Additional Pages, write
	n the last 8 years, have you , California, Idaho, Louisiana,				ates and territories include
	So to line 3. Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
in line 2	2 again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guarant	or or cosigner. Make su	re you have listed the c	ith you. List the person shown reditor on Schedule D (Official redule E/F, or Schedule G to fill
	olumn 1: Your codebtor Ime, Number, Street, City, State and ZI	P Code		Column 2: The creditor Check all schedules the	or to whom you owe the debt apply:
40	arriet Salley Auto Sales 009 Mechanicsville Tpke ichmond, VA 23223			■ Schedule D, line □ Schedule E/F, line □ Schedule G W. Harold Talley	

Schedule H: Your Codebtors

Fill	in this information to identify your	casa.				1							
	btor 1 Harriet E S												
	otor 2 ouse, if filing)				_								
Uni	ted States Bankruptcy Court for the	ne: _EASTERN DISTRICT	OF VIRGINIA		_								
	se number 20-33649		-			Check if this is: An amended A suppleme	nt showin						
\bigcirc	fficial Form 106I							ollowing date:					
	chedule I: Your Inc	rome				MM / DD/ Y	YYY		12/15				
sup spo atta	as complete and accurate as population of the po	u are married and not fili our spouse is not filing w n. On the top of any additi	ng jointly, and your ith you, do not inclu	spouse ide infor	is liv mati	ing with you, inclu on about your spo	ide inforr use. If m	mation about ore space is	your needed,				
1.	Fill in your employment information.				Debtor 1				Debtor 2 or non-filing spouse				
	If you have more than one job,	Employment status	■ Employed			☐ Emplo	☐ Employed						
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not en	☐ Not employed						
	employers.	Occupation	sales										
	Include part-time, seasonal, or self-employed work.	Employer's name	Harriet Sales A	uto Gro	up l	LC							
	Occupation may include studen or homemaker, if it applies.	t Employer's address	4009 Mechanics		pke								
		How long employed t	here? <u>2011</u>										
Par	t 2: Give Details About M	onthly Income											
spou If yo	mate monthly income as of the use unless you are separated. ou or your non-filing spouse have a space, attach a separate sheet	date you file this form. If					n on the li	·					
							non-fili	ing spouse					
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$	0.00	\$	N/A					
3.	Estimate and list monthly over	rtime pay.		3.	+\$	0.00	+\$	N/A					
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	0.00	\$	N/A					

Deb	tor 1	Harriet E Salley	_		Case	number (<i>if kı</i>	nowr	n) <u>2</u>	0-33649			
	Con	y line 4 here	4		For	Debtor 1).0(For Debt non-filing	g spoi		
	-	*	7		Ψ_		<i>.</i>	<u> </u>	Ψ		IN/A	_
5.		all payroll deductions:			_				_			
	5a.	Tax, Medicare, and Social Security deductions		a.	\$_		0.0	_	\$		N/A	_
	5b. 5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans		b. c.	\$_ \$).00	_	\$ \$		N/A	_
	5d.	Required repayments of retirement fund loans		d.	\$).0().0(_	φ \$		N/A N/A	_
	5e.	Insurance		e.	\$-).00	<u> </u>	\$		N/A	_
	5f.	Domestic support obligations	_	f.	\$_).00	_	\$		N/A	_
	5g.	Union dues		g.	\$).0	_	\$		N/A	_
	5h.	Other deductions. Specify:	5	h.+	\$	(0.0	0 +	\$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6		\$	(0.0	0_	\$		N/A	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7		\$	(0.0	0	\$		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total										
		monthly net income.	8	a.	\$	11,219	9.0	0	\$		N/A	
	8b.	Interest and dividends	8	b.	\$	(0.0	0	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce										
		settlement, and property settlement.		c.	\$_		0.0		\$		N/A	_
	8d.	Unemployment compensation		d.	\$_		0.0	<u> </u>	\$		N/A	_
	8e.	Social Security	8	e.	\$	(0.0	U	\$		N/A	_ _
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		f.	\$	().00	0 :	\$		N/A	
	8g.	Pension or retirement income		g.	\$_		0.00	_	\$		N/A	_
	8h.	Other monthly income. Specify:		h.+	\$			0 +	\$		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9		\$	11,219	9.0	0	\$		N/A	4
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	1	1,219.00	+	\$	N/	A =	\$_	11,219.00
11.	Stat Inclu othe Do r Spe	e all other regular contributions to the expenses that you list in Schedular de contributions from an unmarried partner, members of your household, you are friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	r dep	lab	le to p	ay expens	es	listed	in <i>Sched</i>	ule J.	\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certailes										11,219.00
13.	Do y	ou expect an increase or decrease within the year after you file this forn	n?								mbi onth	ned ly income
		Yes. Explain:										
	_											

Fill	in this information to identify your case:				
Deb	tor 1 Harriet E Salley		Check	c if this is:	
L.	<u>-</u>		_	An amended filing	
	tor 2 buse, if filing)			\ supplement show ∣3 expenses as of :	ving postpetition chapter the following date:
ļ	LOUIS DE LA COMPANION DE LA CASTERNA DISTRICT OF MADOINI	10			
Unit	ed States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINI	IA	ľ	MM / DD / YYYY	
	e number 20-33649 nown)				
	fficial Form 106J				
	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this finder (if known). Answer every question.				
Par 1.	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?				
	□ No □ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debto	or 2.	
2.	Do you have dependents? ■ No				
_	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the dependents names.				□ No □ Yes
	·				□ No
					Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				_ 100
Par	t 2: Estimate Your Ongoing Monthly Expenses				
exp	imate your expenses as of your bankruptcy filing date unless your benses as of a date after the bankruptcy is filed. If this is a suppolicable date.				
Inc	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on Schedule I: Y	you know			
	ficial Form 106l.)	ou. moomo		Your expe	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	e 4. \$		4,669.49
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		190.00
_	4d. Homeowner's association or condominium dues		4d. \$		20.00
5.	Additional mortgage payments for your residence, such as hor	me equity loans	5. \$		0.00

Debto	r 1 Harri	et E Salley	Case num	ber (if known)	20-33649
6. L	Jtilities:				
		city, heat, natural gas	6a.	\$	600.00
		, sewer, garbage collection	6b.	\$	200.00
		none, cell phone, Internet, satellite, and cable services	6c.	\$	500.00
	•		6d.	\$	
		Specify:			0.00
		ousekeeping supplies	7.	·	800.00
		nd children's education costs	8.	\$	0.00
		undry, and dry cleaning	9.	\$	150.00
0. F	Personal ca	re products and services	10.	\$	200.00
1. N	ledical and	I dental expenses	11.	\$	100.00
2. T	ransportat	ion. Include gas, maintenance, bus or train fare.			
	o not includ	de car payments.	12.	\$	0.00
3. E	Entertainme	ent, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
4. C	Charitable o	contributions and religious donations	14.	\$	0.00
	nsurance.	G		· -	
-		de insurance deducted from your pay or included in lines 4 or 20.			
	5a. Life in		15a.	\$	0.00
	5b. Health		15b.	·	0.00
		e insurance	15c.	·	0.00
		insurance. Specify:	15d.	· -	
			150.	Ψ	0.00
		ot include taxes deducted from your pay or included in lines 4 or 20.	40	Φ.	0.00
	Specify:		16.	\$	0.00
		or lease payments:		•	
		ayments for Vehicle 1	17a.	*	0.00
1	7b. Car pa	ayments for Vehicle 2	17b.		0.00
1	7c. Other.	Specify:	17c.	\$	0.00
1	7d. Other.	Specify:	17d.	\$	0.00
8. Y	our payme	ents of alimony, maintenance, and support that you did not repo	rt as		
		om your pay on line 5, Schedule I, Your Income (Official Form 10		\$	0.00
9. C	Other paym	ents you make to support others who do not live with you.	•	\$	0.00
	Specify:	•	19.		
0. C	Other real p	roperty expenses not included in lines 4 or 5 of this form or on	Schedule I: Yo	our Income.	
		ages on other property	20a.		0.00
2	20b. Real e	estate taxes	20b.	\$	0.00
		rty, homeowner's, or renter's insurance	20c.		0.00
		enance, repair, and upkeep expenses	20d.	·	
					0.00
		owner's association or condominium dues	20e.	·	0.00
1. C	Other: Spec	ify: misc	21.	+\$	200.00
2 -	`alculato w	our monthly expenses			
	-	es 4 through 21.		e	7 700 40
		S .	1.0	\$	7,729.49
		ne 22 (monthly expenses for Debtor 2), if any, from Official Form 106	J- ∠	\$	
2	2c. Add line	e 22a and 22b. The result is your monthly expenses.		\$	7,729.49
3 🖍	`alculate w	our monthly net income.			
	•		23a.	¢	14 240 00
		line 12 (your combined monthly income) from Schedule I.		· -	11,219.00
2	so. Copy	your monthly expenses from line 22c above.	23b.	-\$	7,729.49
2	3c Subtra	act your monthly expenses from your monthly income.			
2		sult is your <i>monthly net income</i> .	23c.	\$	3,489.51
F	or example, on odification to	ect an increase or decrease in your expenses within the year aft do you expect to finish paying for your car loan within the year or do you expect the terms of your mortgage?			ease or decrease because of a
	No.				
Г	☐ Yes.	Explain here:			
	_ 100.	1			

Fill in th	nis inforn	nation to identify your	case:				
Debtor	1	Harriet E Salley					
		First Name	Middle Name	Last N	lame		
Debtor 2 (Spouse if	_	First Name	Middle Name	Last N	lame		
United S	States Bar	nkruptcy Court for the:	EASTERN DISTRICT	OF VIRGINIA		_	
Case nu	umber 2	20-33649					_ 0
(if known)							☐ Check if this is an amended filing
If two m You mus	arried pe st file this g money	ople are filing together	r, both are equally resp le bankruptcy schedule n connection with a bar	onsible for sup	r's Schedule oplying correct informati schedules. Making a fal can result in fines up to	ion. Ise statement,	concealing property, or mprisonment for up to 20
	Sign	Below					
Die	d you pay	or agree to pay some	one who is NOT an atto	orney to help y	ou fill out bankruptcy fo	rms?	
-	No						
	Yes. N	lame of person					Petition Preparer's Notice, Signature (Official Form 119)
		ty of perjury, I declare true and correct.	that I have read the su	mmary and sch	nedules filed with this de	eclaration and	
Х	/s/ Harr	riet E Salley		x			
	Harriet	E Salley e of Debtor 1			Signature of Debtor 2		
	Date 8	8/26/2020			Date		

Fil	l in this inform	nation to identify you	r case:			
De	ebtor 1	Harriet E Salley				
		First Name	Middle Name	Last Name		
1 -	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA		
Ca	se number 2	20-33649				
1	(nown)	.0-33043			_	check if this is an mended filing
Of	fficial Fo	rm 107				
			Affairs for Individ	duals Filing for B	ankruptcy	4/19
info	ormation. If m		attach a separate sheet to		equally responsible for sup additional pages, write you	
Pa	rt 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married ■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ Na					
	■ No □ Yes. List	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	·.	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory co, Texas, Washington and W	
	■ No					
	_	ke sure you fill out Scl	hedule H: Your Codebtors (Of	fficial Form 106H).		
Pa	rt 2 Explain	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	_	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	Unknown	☐ Wages, commissions, bonuses, tips	and oxoldolollo)
	-		Operating a business		☐ Operating a business	

Official Form 107

Case number (if known) 20-33649 Debtor 1 Harriet E Salley Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) Unknown ☐ Wages, commissions, ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business For last calendar year: Unknown ☐ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2019) bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year before that: \$22,917.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2018) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not

Creditor's Name and Address

Dates of payment

attorney for this bankruptcy case.

Total amount paid

include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

Amount you still owe

Was this payment for ...

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Dominion Virginia Power(p) P.O. Box 26666 18th Floor Richmond, VA 23261	monthly electric bills estimated at \$600/mo	\$1,800.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ■ Other <u>utilties</u>
	Verizon Wireless (p) Bankruptcy Administration 500 Technology Drive Suite 550 St Charles, MO 63304-2225	monthly phone service payments of roughly \$400/mo	\$1,200.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other <u>Utilities</u>
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gen a control, or owner of 20% o	eral partners; partner r more of their voting	erships of which you	u are a general partner; corporation ny managing agent, including one fo
	Yes. List all payments to an insider.				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		ments or transfer a	ny property on a	ccount of a debt that benefited an
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment
			paid	still owe	Include creditor's name
Pa	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures			
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.				
	□ No □ Yes 5'll to the date'le				
	Yes. Fill in the details. Case title	Nature of the case	Court or agency		Status of the case
	Case number				_
	Clearwater Pool Service Inc vs	CIVIL JUDGMENT	CHESTERFIELD DISTRICT COURT		Pending
	HARRIETTE SALLEY 41GV1801852300		COOKI		☐ On appeal ☐ Concluded

Case number (if known) 20-33649

Debtor 1 Harriet E Salley

10.	Within 1 year before you filed for bankru Check all that apply and fill in the details be		as any of your property repossessed, foreclosed	, garnished, attached	l, seized, or levied?		
	■ No. Go to line 11. □ Yes. Fill in the information below.						
	Creditor Name and Address	De	scribe the Property	Date	Value of the		
			·		property		
		EX	plain what happened				
11.	Within 90 days before you filed for bank accounts or refuse to make a payment b ■ No □ Yes. Fill in the details.		did any creditor, including a bank or financial ins you owed a debt?	stitution, set off any a	mounts from your		
	Creditor Name and Address	De	scribe the action the creditor took	Date action was	Amount		
				taken			
12.	2. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?						
	■ No □ Yes						
Par	t 5: List Certain Gifts and Contribution	าร					
13.	Within 2 years before you filed for hank	ruptcv. (did you give any gifts with a total value of more th	han \$600 per person	?		
	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No						
	Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$60 per person	00	Describe the gifts	Dates you gave the gifts	Value		
	Person to Whom You Gave the Gift and Address:	I					
14.	Within 2 years before you filed for bankı	uptcy, c	lid you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?		
	■ No						
	Yes. Fill in the details for each gift or o						
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		Describe what you contributed	Dates you contributed	Value		
-		-,					
	t 6: List Certain Losses						
15.	or gambling?	iptcy or	since you filed for bankruptcy, did you lose anyt	thing because of thef	t, fire, other disaster,		
	■ No						
	Yes. Fill in the details.						
	Describe the property you lost and	Descri	be any insurance coverage for the loss	Date of your	Value of property		
	how the loss occurred		the amount that insurance has paid. List pending ace claims on line 33 of Schedule A/B: Property.	loss	lost		
Par	t 7: List Certain Payments or Transfer	s					
16.	consulted about seeking bankruptcy or	preparii	d you or anyone else acting on your behalf pay on going a bankruptcy petition? s, or credit counseling agencies for services required		rty to anyone you		
	□ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was	Amount of		
	Email or website address		u anoici icu	made	payment		
Offic	Person Who Made the Payment, if Not ` al Form 107 Sta		f Financial Affairs for Individuals Filing for Bankruptcy		page 4		

Case number (if known) 20-33649

Debtor 1 Harriet E Salley

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and variansferred	alue of any prope	erty	Date payment or transfer was made	Amount of payment		
	Jeanne E. Hovenden, P.L.L.C. 9830 Lori Road P O Box 1839 Chesterfield, VA 23832	\$2000 total rece \$40 for credit re fees of the \$5,4	eport and \$1650	in legal	prior to filing	\$2,000.00		
	Money Sharp 1916 N. Fairfield Ave Suite 200 Chicago, IL 60647	2 credit counse	ling classes		prior to filing of each of 2 cases	\$20.00		
	Jeanne E. Hovenden, P.L.L.C. 9830 Lori Road P O Box 1839 Chesterfield, VA 23832	\$5292 paid in co which was disn		case 19-	prior to filing and during Ch 13 case	\$5,292.00		
17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors. Do not include any payment or transfer that you like the property of the pro	or to make payments			r transfer any proper	rty to anyone who		
	Yes. Fill in the details. Person Who Was Paid	Decemention and	value of any nuona	. wés e	Data navment	Amount of		
	Address	transferred	alue of any prope	erty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankruptcy,			fer any prop	erty to anyone, other	than property		
	transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.							
	■ No □ Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and very property transfer			any property or received or debts	Date transfer was made		
	Person's relationship to you			P				
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection No ☐ Yes. Fill in the details.		ny property to a se	elf-settled tru	st or similar device o	of which you are a		
	Name of trust	Description and v	alue of the prope	rty transferr	ed	Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposi	t Boxes, and Stora	age Units				
20.	Within 1 year before you filed for bankruptcy,	were any financial ac	counts or instrum	nents held in	your name, or for yo	our benefit, closed,		
	sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa No			f deposit; sh	ares in banks, credit	unions, brokerage		
	Yes. Fill in the details.	oot 4 digits of	Type of access	. D=	to account was	l ant balance		
		ast 4 digits of ccount number	Type of account instrument	clo mo	te account was sed, sold, ved, or nsferred	Last balance before closing or transfer		

21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	No						
	☐ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or pl	ace other than your home within 1 y	year before you filed for bankruptcy	?			
	□ No■ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
	storage unit	Mary Salley (mother), Jonathan Salley (son), Aaron Salley (brother)	misc household goods	□ No ■ Yes			
Pai	t 9: Identify Property You Hold or Control for S	Someone Else					
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any propert	y you borrowed from, are storing for	, or hold in trust			
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Pai	t 10: Give Details About Environmental Informa	ation					
	the purpose of Part 10, the following definitions						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	ir, land, soil, surface water, ground	- ·				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		w, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic s	substance,			
₹ер	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.				
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable ı	under or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any	release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			

26.	■ No	ministrative proceeding under any envi	ronmental law? Include settlements and orders.				
	☐ Yes. Fill in the details. Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case Status of the case				
Par	t 11: Give Details About Your Business or	Connections to Any Business					
27.	Within 4 years before you filed for bankrup	tcy, did you own a business or have an	y of the following connections to any business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	■ A member of a limited liability com	p (LLP)					
	☐ A partner in a partnership						
	☐ An officer, director, or managing ex	☐ An officer, director, or managing executive of a corporation					
	☐ An owner of at least 5% of the votin	☐ An owner of at least 5% of the voting or equity securities of a corporation					
	lacksquare No. None of the above applies. Go to	plies. Go to Part 12.					
	Yes. Check all that apply above and fil	I in the details below for each business					
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.				
		·	Dates business existed				
	Harriet Sales Auto Group LLC 4009 Mechanicsville Tpke	used car sales	EIN: 45-3711564				
	Richmond, VA 23223	Clive A Morey, CPA Morey Jones & Pfeiffer 3314 N Parham Rd, Ste A Henrico VA 23294-4118	From-To Nov 2011 to present				
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement t	o anyone about your business? Include all financial				
	□ No■ Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued					
	Village Bank 15521 Midlothian Tnpk. Suite 200 Midlothian, VA 23113	Spring 2020 for PPP loan (which was denied)					

Debtor	1 Harriet E Salley	Harriet E Salley		20-33649	
	_				
Part 12	Sign Below				
are true with a b	and correct. I understand th	tement of Financial Affairs and any attachments nat making a false statement, concealing proper n fines up to \$250,000, or imprisonment for up to 171.	rty, or obtaining money or		
/s/ Ha	rriet E Salley				
	et E Salley ure of Debtor 1	Signature of Debtor 2			
Date	8/26/2020	Date			
Did you	attach additional pages to \	Your Statement of Financial Affairs for Individua	als Filing for Bankruptcy (Official Form 107)?	
■ No					
☐ Yes					
Did you	ı pay or agree to pay someon	ne who is not an attorney to help you fill out bar	nkruptcy forms?		
■ No		, , , ,			

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).